

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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 P.O. Box 1450
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23413 7590 03/05/2007
 CANTOR COLBURN, L.L.P.
 55 GRIFFIN ROAD SOUTH
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Linda C. Gould (Depositor's name)
 (Signature)
 June 4, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/594,873	06/15/2000	Patience Helting	14X200087	

TITLE OF INVENTION: METHOD OF VISUALIZATION OF A PART OF A THREE-DIMENSIONAL IMAGE 06/05/2007 HGBRE#2 00000048 502513 09594873

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	06/05/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
YANG, RYAN R	2628	1345-434000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/17; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

G.E. Medical Systems, S.A.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

France

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☐ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies

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☐ A check is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2513. (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Philmore H. Colburn II

Date June 4, 2007

Typed or printed name

Registration No. 35,101

This collection of information is required by 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FACSIMILE TRANSMITTAL SHEET

DATE: June 4, 2007

TO: ISSUE FEE

COMPANY: U.S. PATENT AND TRADEMARK OFFICE

FAX NO.: (571) 273-2885

TEL. NO.:

FROM: Linda Gould (Cantor Colburn LLP)

OUR REF: GEM-0277 (14XZ00087)

YOUR REF: USSN 09/594,873

TOTAL NUMBER OF PAGES SENT 5
(INCLUDING THIS COVER SHEET):

COMMENTS: TO WHOM IT MAY CONCERN:

Please find enclosed the Base Issue Fee Transmittal Form for U.S. Serial No. 09/594,873. Also, find enclosed a "FEE ADDRESS" INDICATION FORM (1 Page) – and "COMMENTS ON STATEMENTS OF REASONS FOR ALLOWANCE" (2 Pages).

Please charge the Issue fee to Deposit Account 50-2513 (\$1,400).

Thank you,

CANTOR COLBURN LLP

If there are any problems with this transmission,
please call (860) 286-2929 and ask for L. Gould

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